U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 8096	2. Fiscal Year Covered From:		
	1 / 5004 Through: 12/31/2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name CURT A FRICKSON	Name CEMENT MASONS UNION LOCAL NO 503		
	Labor Organization File Number 012-533		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 139 S. 25+h AVE	Street 739 S 25th AVE		
City BELLWOOD	City Balwob		
State TL ZIP Code + 4 (2010)4-1995	State ZIP Code + 4 (20104-1995)		
5 Position in labor organization. WELFARE FUND TRUSTEE			
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):			
	derived income or other economic benefit of		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization	on represents or is actively seeking to represent.		
A. Held an interest in, engaged in transactions (including loans) with, or	derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	on represents or is actively seeking to represent.		
A. Held an interest in, engaged in transactions (including loans) with, or or monetary value from an employer whose employees your organization. B. Name and address of Employer (including trade name, if any).	on represents or is actively seeking to represent.		
A. Held an interest in, engaged in transactions (including loans) with, or emonetary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any). Name	7.a. Nature of Interest, Transaction, or Income.		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any:	on represents or is actively seeking to represent.		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any. P.O. Box, Bldg., Room No., if any	7.a. Nature of Interest, Transaction, or Income.		
A. Held an interest in, engaged in transactions (including loans) with, or or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	7.a. Nature of Interest, Transaction, or Income.		
A. Held an interest in, engaged in transactions (including loans) with, or or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.		
A. Held an interest in, engaged in transactions (including loans) with, or or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. Perjury and other applicable penalties of the law, that all of the information and documents), has been examined by the signatory and is, to the best of the		
A. Held an interest in, engaged in transactions (including loans) with, or or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany)	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. Perjury and other applicable penalties of the law, that all of the information and documents), has been examined by the signatory and is, to the best of the		

Mame	οf	Person	Filing
IVAIIIC	vı	L CIOUII	1 1301 134

CURT	K	GOLLE	75 A
CURT	<i>J</i> .	ERICKS	O/V

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name CEMENT MASSINS THISTMOTE	a. Labor Organization	
Trade Name, if any:	b, Trust	
P.O. Box, Bldg., Room No., if any	c. Employer	
Street 739 5 254 N AV	industrial	
City BEUWOOD		
State ZIP Code + 4 Co0 to 4:		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name CANGNIT MATCHIS LOOPL SOL WELFORE FIND	TROSTEE	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 739 5 2545 AUE	11.b. Approximate dollar value of such dealing.	
City PERCUCION TO THE PROPERTY OF THE PROPERTY	12.a. Nature of interest held or income received.	and the second of the second o
State ZIP Code + 4 Colou	RELINBURSEMENT. FOR LOSE O FOR ATTENDING DOL: X CRIS EDUCATION AL CONFERENCE	fi wages A Regulario D
	12.b. Amount.	1416,00
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.	
(including trade name, if any). Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street Street		
City		
State ZIP Code + 4		
13.b. is the Business an Employer or Consultant ?	14.b. Amount of payment.	
19.D. 19 the brances an embioker first on consolient first t		and other than the second of t

Name of Person Filing CURT A ERICKSON		File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any). Name CEMENT MACONS INSTITUTE Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 739 S 254 h W C City Africa 01) State IL ZIP Code + 4 1/0 to 4	9. Business deals with: a. Labor Organiza b. Trust c. Employer	ition	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name CENCENT MASONS USCAL 502. WELFARY FUND Trade Name, if any: P.O. Box, Bldg., Room No., if any	11.a. Nature of such deali TR05Tを2	ing.	
Street 139 5 25+1 AVE	11.b. Approximate dollar value of such dealing.		
State EL ZIP Code + 4 LOUS	FOR DOL + C EDUCATIONAL COA	Id or income received. LENT FROM TRUST FUND ERISAI REQUIRED NERENCES FOOD TRAVEL + EXERCISE OF MY FIDUCIARY DUTY	
	12.b. Amount.	293023	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4	Programme Advantage of Advantag	Application of the content of the co	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	A complete of the second control of the seco	

13.b. Is the Business an Employer

or Consultant

CURT A ERICKSON

File Number U-

B. Held an interest in or derived income or economic benefit with monetary substantial part of which consists of buying from, selling or leasing to, or off of an employer whose employees your labor organization represents or is a (2) any part of which consists of buying from or selling or leasing directly or dealing with your labor organization or with a trust in which your labor organization.	erwise dealing with the business ctively seeking to represent, or indirectly to or otherwise	
8. Name and address of Business (including trade name, if any). Name RIVOLD AND KADJAN Trade Name, if any: P.O. Box, Bldg., Room No., if any Street PA CASSON BUVO City CARREDO State J.C. ZIP Code + 4 (a0) in 4-3958	9. Business deals with: a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's пате.	11.a. Nature of such dealing.	
Name Centery Massins Entries 202 (a) (1997 fight) Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 734 2245 And	TRUIT FOOD ATRONIEG	
Street 354:5 2541 Av2	11.b. Approximate dollar value of such dealing.	10699600
City & Little of D	12.a. Nature of interest held or income received	· · · · · · · · · · · · · · · · · · ·
State ZIP Code + 4 Church Paul	CHRISTMAS PARTY	
	12.b. Amount.	140.78
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 3.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	er parts A and B above) or other thing of value. 14.a. Nature of payment.	
Frade Name, if any: P.O. Box, Bldg., Room No., if any Street Sity ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	and productive of applications for the second section of productive to the second second